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	RULE			

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	OH	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	<u>q.a.f.</u> Examiner's Signature Initials		13	19	3

ADDRESS

04859
 MACMILLAN SOBANSKI & TODD, LLC
 ONE MARITIME PLAZA FOURTH FLOOR
 720 WATER STREET
 TOLEDO , OH
 43604-1619

TITLE

Safety block device for use in a press device

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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